

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 / 749

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MS. BETH F. FABER

Mailing Address 5097 OLD TRAVELLER LN

City

MECHANICSVILLE

State

VA

Zip Code

23111-6429

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	2	/	2	0	1	1

Transaction ID: SA11.14302870

Amount of Each Receipt this Period

75.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ERVON E. FAIRBANKS

Mailing Address 340 5TH AVENUE

City

SKAGWAY

State

AR

Zip Code

99840

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAIRWAY MARKET

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

OWNER

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	1	/	2	0	1	1

Transaction ID: SA11.14300921

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MS. PAMELA S. FARRELL

Mailing Address P.O. BOX 339

City

CHARDON

State

OH

Zip Code

44024-0339

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

HOMEMAKER

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	1	1

Transaction ID: SA11.14330262

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)